


| PUBLIC DISCLOSURE COMMISSION  711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 Toll Free 1-877-601-2828 | | Candidate Registration | C1 (1/2008) | 100558254 12-18-2013 |
|---|--|---|--|---|
| Candidate's Name (Give candidate's full name.) LYNDA D WILSON | | | Telephone Number 360-608-4519 | |
| Candidate's Committee Name (Do not abbreviate.) FRIENDS TO ELECT LYNDA WILSON | | | Fax Number 360-253-6801 | |
| Mailing Address PO BOX 820568 | | | Candidate's E-Mail Address LYNDA@ELECTLYNDAWILSON.C | |
| City VANCOUVER | | County CLARK | Zip + 4 98682 | Campaign E-Mail Address Lynda@ElectLyndaWilson.c |
| 1. What office are you running for? STATE REPRESENTATIVE | | Legislative District, County or City LEG DISTRICT 17 - HOUSE | Position No. 1 | Do you now hold this office? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| 2. Political party (if partisan office) REPUBLICAN | | 3. Date of general or special election 11-04-2014 | | |
| 4. How much do you plan to spend during your entire election campaign, including the primary and general elections? Based on that estimate, choose one of the reporting options below. If no box is checked you are obligated to use Option II, Full Reporting. See instruction manuals for information about reports required and changing reporting options. | | | | |
| <input type="checkbox"/> Option I MINI REPORTING: In addition to my filing fee of \$_____, I will raise and spend no more than \$5,000, including any charges for inclusion in state and local voters pamphlets. I will not accept more than \$500 in the aggregate from any contributor except myself. | | | | |
| <input checked="" type="checkbox"/> Option II FULL REPORTING: I will use the Full Reporting system. I will file the frequent, detailed campaign reports required by law. | | | | |
| 5. Treasurer's Name and Address. Does treasurer perform <u>only</u> ministerial functions? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> . See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet. | | | Daytime Telephone Number | |
| LES BROSIUS PO BOX 820568, VANCOUVER WA 98682 | | | 360-604-2209 | |
| 6. Persons who perform only ministerial functions on your behalf <u>and</u> on behalf of other candidates or political committees. List name, title and address of these persons. See WAC 390-05-243 and next page for details. <input type="checkbox"/> Continued on attached sheet. | | | | |
| STEVE NELSON, PUBLICITY, 4509 NE 26TH AVE, VANCOUVER WA 98663 | | | | |
| 7. Committee Officers and other persons who authorize expenditures or make decisions on your behalf. List name, title and address. See next page for definition of "officer." <input type="checkbox"/> Continued on attached sheet. | | | | |
| DOUG SIMPSON, POLITICAL CONSULTANT, 6010 WYNN JONES RD, PORT ORCHARD WA 98366 TRACY WILSON, CONSULTANT, PO BOX 820568, VANCOUVER WA 98682 | | | | |
| 8. Campaign Bank or Depository COLUMBIA CREDIT UNION | | Branch ORCHARDS | City VANCOUVER | |
| 9. Related or Affiliated Political Committees. List name, address and relationship. <input type="checkbox"/> Continued on attached sheet. | | | | |
| 10. Campaign books must be open to the public by appointment between 8 a.m. and 8 p.m. during the eight days before the election, except Saturdays, Sundays, and legal holidays. In the space below, provide contact information for scheduling an appointment and the address where the inspection will take place. It is not acceptable to provide a post office box or an out-of-area address. | | | | |
| Street Address, Room Number, City where campaign books will be available for inspection 11012 NE 4TH PLAIN RD, VANCOUVER In order to make an appointment, contact the campaign at (telephone, fax, e-mail): 360-608-4519 360-253-6801 | | | | |
| 11. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge. | | | | |
| Candidate's Signature LYNDA D WILSON | | | Date 12-18-2013 | |